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APPLICANTS <p style="margin-left: 40px;">Steve Mead, Mississauga, CANADA;</p> <p> ** CONTINUING DATA ***** <i>None</i> <i>YMA</i> </p> <p> ** FOREIGN APPLICATIONS ***** </p>																			
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/10/2001																			
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%; border-bottom: 1px solid black;"> Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no </td> <td style="width: 10%; text-align: center; vertical-align: top;"> STATE OR COUNTRY CANADA </td> <td style="width: 10%; text-align: center; vertical-align: top;"> SHEETS DRAWING 5 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> TOTAL CLAIMS 20 </td> <td style="width: 10%; text-align: center; vertical-align: top;"> INDEPENDENT CLAIMS 3 </td> </tr> <tr> <td style="border-bottom: 1px solid black;"> 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance </td> <td colspan="4"></td> </tr> <tr> <td style="border-bottom: 1px solid black;"> Verified and Acknowledged Examiner's Signature Initials </td> <td colspan="4"></td> </tr> </table>					Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CANADA	SHEETS DRAWING 5	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3	35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance					Verified and Acknowledged Examiner's Signature Initials				
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ADDRESS <div style="text-align: right; margin-right: 100px;">AIR MAIL</div> <p>33797 MILLER THOMPSON, LLP 20 QUEEN STREET WEST, SUITE 2500 TORONTO , ON M5H 3S1 CANADA</p>																			
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FILING FEE RECEIVED 398	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:																		
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